

**DECLARATION OF GENEVIEVE C.**

Genevieve C. hereby declares under penalty of perjury that the following is true and correct

1 I make this declaration in support of Plaintiffs' motion for a preliminary injunction requiring Adult Protective Services ("APS") to provide me and others with adequate protective services.

2. I am proceeding anonymously in this action because I do not want the public to have knowledge of my numerous medical conditions and access to my personal medical information.

3 I have been disabled and unable to work since November , 2003. Before that time I had been working as a social worker in a methadone maintenance clinic in a portable trailer that, unbeknownst to me, had a leaking HVAC system. Because of prolonged exposure to hazardous chemicals in the trailer, I became increasingly ill while my doctors could not diagnose me. It took almost two years for my doctors to diagnose me with multiple heavy metal poisonings ("metal poisoning") and multiple chemical exposures, as a result of probable hydrocarbon exposure.

4. The metal poisoning caused my health to severely decline to the point where I am barely able to care for myself. Among other things, an outcome of the metal poisoning was spinal degeneration along my entire spine, resulting in chronic pain in both of my hips and my neck. My whole body feels very stiff (particularly in the morning, when it takes over 30 minutes to get out of bed). The stiffness and pain make it very difficult for me to sit or bend.

5 The metal poisoning has also caused me to develop interstitial cystitis, which consists of ulcers in the bladder, resulting in incontinence, urine retention and a distended irritable bladder. I also now have several growths including; two painful fibroids in my uterus, painful ovarian cysts, lymph noditis (enlarged lymph nodes), adenopathy, thyroid goiter, enlarged uvula, pharyngeal cysts and nasal polyps, all of which contribute to difficulty swallowing and all resulting from the chemical exposure.

6. The metal poisoning has also caused me to develop an autoimmune disease called myasthenia gravis, which causes severe muscle pain, muscle weakness in the upper and lower limbs, and the loss of muscle tone in the face and the grasp reflex in my hands. Therefore I have difficulty walking, standing or climbing stairs. I am only inconsistently able to hold objects under five pounds, and often unable to hold objects over ten pounds. I have particular difficulty grasping the handle of grocery shopping carts.

7. The metal poisoning also caused me to develop facial neuralgia, which results in stiffening of facial muscles and twitching on the right side of my face, and loss of feeling and muscle tone with a downward drooping facial expression. This is partially alleviated by medication.

8. I have also developed fibromyalgia and vasculitis, which along with myasthenia gravis causes burning muscular and vascular pain throughout my body.

9. The chemical poisoning has affected my liver and pancreas. I have chemically induced neuropathy and gastropathy, which impairs digestion, is painful, causes multiple nutrient deficiencies, bruising, chronic diarrhea and chronic weight loss.

In addition I have severe chronic hypoglycemia, which requires me to eat every two hours just to function.

10. I suffer from severe atypical asthma and have sudden asthma attacks almost every night, and on some nights I have attack after attack until the morning. The attacks are triggered by the myasthenia graves, affecting my diaphragm as well as the airways. My airways become suddenly blocked and I am unable to breathe out or call for help.

also suffer from Sjogren's syndrome, another autoimmune disease. which dries out mucus membranes throughout the body, also triggering asthma.

12. The metal poisoning causes me to be confused and disoriented, sends me into mental fugues (a dull state of mind) and causes severe memory loss. I also suffer from severe chronic fatigue syndrome to the point where I cannot leave my home unless take prescribed stimulants. These conditions cause me to be intermittently unable to handle my documentation and advocate for myself.

13. Because of my disabilities, I am not able to perform many of the functions of daily life. I cannot manage to clean my apartment. Because I suffer from chronic fatigue syndrome and other effects of the metal poisoning, there have been several occasions when I have fallen asleep with the stove on and on one occasion the fire department had to come.

14. I have vascular pain and swelling in my arms and legs. At times, I am too weak to hold my head up. I sometimes have to lift my legs with my hands to cross them. I slump in my chair because I can not sit upright. This is typical of myasthenia graves.

15. My illnesses cause me to fall asleep in the middle of the day and to be so weak that I cannot stand up to cook, clean up afterwards or bring in groceries.

16. I am able to walk or stand comfortably for only 10 minutes at a time. If I walk or stand for 20 minutes, I become faint and sometimes collapse from fatigue, hypoglycemia or pain. It is almost impossible for me to go up or down stairs. Because of weakness in my hands, I have a very difficult time doing laundry, grocery shopping, or cooking. While I can take the public bus very short distances, it is very difficult to go anywhere that requires a bus transfer or a subway ride. I get lost in familiar places and have difficulty reading subway maps. I can not recall directions and have trouble reading signs.

17. Because of my disabilities, I have been granted partial Access-A-Ride services, with out of borough services all year and in-Queens service during the extreme weather only. Thus, my in-Queens Access-A-Ride services have just been discontinued due to the change of season. I am very upset about this because in order to get to my place of religious worship on public transportation I will be required to take two different buses, which I can often not manage. Attending worship was the only thing that kept me fighting to survive during the darkest days of my illness and it is very difficult for me now that my Access-A-Ride services are discontinued.

18. I have not been able to work since 2003. After I spent my savings, I hired a lawyer to submit applications for Supplemental Security Income ("SSI") benefits and Social Security Disability ("SSD") benefits in December of 2005. Unfortunately, I later found out that he never sent in my SSD application and did not send the proper financial information to document my need for SSI, so that the application for SSI was denied in

July of 2006. Thus, my only income is Public Assistance. My rent is \$607 per month, of which Public Assistance pays \$215. I also receive \$137 per month in cash Public Assistance and \$155 per month in Food Stamps. However, \$155 per month for food is not enough, especially with a restricted diet and hypoglycemia, and I generally spend another \$120 per month on food. I also have to spend \$40 per month for a disabled Metrocard, which leaves me with no money to cover the rest of my rent, my non-food groceries, my phone bill and my electric bill. Additionally, I have to pay \$60 per week in travel costs to my chelation therapy in New Jersey to treat my metal poisoning, which I may have to discontinue because I cannot afford travel expenses. In the past I have had roommates who helped with the rent, but due to the fact of my illness and my weakened state, now my apartment is too cluttered and messy for anyone but me to live there. I have survived only through the inconsistent help of strangers and friends.

19. Consequently, I have been unable to pay my landlord the full rent in over a year. I owe him over \$4,000. While he has not yet begun an eviction proceeding against me, he has told board members, who told other tenants and owners in my building that he plans to evict me. I am very scared, but am not strong enough to move.

20. In or around October of 2006, I was so sick that I could barely manage to feed myself or remember when to take medication. I did not have the strength to cook or clean my apartment, and was doing the minimum amount that I had to do to stay alive. The state of my apartment had deteriorated to the point it had become infested with roaches and filled with piles of my medical documents. One day in October, due to my chronic fatigue and mental confusion, I forgot to take my stimulant medicine and spent the next couple of days feeling as if I were dying, due to low blood pressure.

21 Once I took my next dose of stimulant medicine, realized that I had become too sick to manage my life. On October 16, 2006, as a last resort, I called the APS central intake line. The APS representative interviewed me about my mental capabilities and the amount of pain I was suffering, and told me to call back the next day. When I called back the next day the APS representative told me that my case had been accepted and that my case was being assigned to JASA for case management. The APS representative further told me that someone from JASA would be calling me shortly.

22. Later that week I had not heard anything from JASA, so I called the APS intake worker who told me that my caseworker's name was Mark Mehler. I then called Mr. Mehler and informed him that I had been assigned to him and we made arrangements to meet in my home.

23. Mr. Mehler did not have time to meet with me until November 26, 2006, over one month after our initial conversation. We were supposed to meet at my home, but I was at a doctor's appointment that ran late, so he met me in my doctor's waiting room a few blocks from my home.

24. During that meeting (as well as before and after that meeting), I told Mr. Mehler I needed help with some light cleaning my apartment so that I could find a roommate, appealing the restrictions on my Access-A-Ride services, and applying for SSD and reopening my SSI case. I also told him that I needed financial help to pay my phone and electric bill, and about \$2,000 in rent arrears that I owed my landlord, and a lawyer to represent me at my upcoming SSD hearing. I further explained to him that I was likely to be evicted soon, and needed help either figuring out a way to pay the rent or

help finding a new place to live. also said that I needed help applying for home care to help me cook, shop and do laundry.

25. Mr. Mehler was sympathetic and said that he could help me with all of the above. He specifically said that APS would pay for my overdue phone and electric bills to keep them from being disconnected.

26. Over a week later, on or about December 4, 2006, I had not heard from Mr. Mehler so I called him. He then told me that instead of APS paying to keep my phone and electricity from being disconnected, he was going to ask my family for the money. I told him that my family would not help me. He then called my mother, who has severe psychiatric problems, who told him that she had been supporting me for years (this was not true) but that she would give \$50 to help me.

27. Mr. Mehler believed my mother and told me that APS would not be able to help me after all. He said that APS would not be able to save my apartment because I owed too much in arrears, and that APS would not step in until after I received a 5-day notice of eviction and that I would have to file my own papers in Housing Court. He said if I was evicted I would be placed in PSCH Residential Services for Adults with Developmental Disabilities ("PSCH"), although I was not mentally ill.

28. He also said that APS would not help me with cleaning, the electric bill or the phone bill or anything else that I asked for. He said that I would have to handle my Access-A-Ride appeal and my SSI and SSD case alone.

29. I was shocked and objected that he had changed his mind about helping me with payments of the phone and electric bill. Mr. Mehler again said that it was time for me to give up my apartment and move into a psychiatric residence, that APS did not

have the resources to help me, and that Public Assistance would not pay as much as I needed in arrears.

30. On December 13, 2006, I called Mr. Mehler's supervisor, Janet Mehraben, and complained that he had gone back on his agreement to help me pay the phone and electric bills. Upon my insistence, she authorized a small payment toward the electric bill and Mr. Mehler applied the \$50 my mother had donated toward the electric bill. She did not help me with the phone bill, and told me that APS would not help me financially again.

31. I then received a "Notice of Eligibility Determination" dated December 16, 2006 which stated that I had been accepted as APS client.

32. While I had been scheduled for a psychiatrist to evaluate me in my home on December 18, 2006, APS called and cancelled it without rescheduling.

33. Because Mr. Mehler had not helped me to get home care services, I called JASA and requested an application. When I received it, I took it to my neurologist and within a month, he had filled out a request for home care services.

34. On January 3, 2007, I called Mr. Mehler and asked him for his fax number so that I could send him the executed home care application. He told me that I shouldn't bother sending it to him because my home was too messy and home care would not go in. He did not offer to provide me help with cleaning.

35. Also in mid January of 2007, APS attempted to reschedule the psychiatric evaluation. Mr. Mehler called me and said that a psychiatrist would be coming to see me on a day that I had three doctors' appointments. I explained this to him, and asked that the evaluation be changed to a different day. He refused, and forced me to schedule the



evaluation during the thirty minute break I had between appointments. When he and the doctor came to evaluate me, the doctor was late and by the time she arrived, was already waiting outside for Access-A-Ride to drive me to my appointment. Mr. Mehler and the doctor threatened that if I did not cancel my appointments and take them up to my apartment immediately, they would gain access by court order. Then, my Access-A-Ride arrived and I went to my medical appointment.

36. The next day, I called Mr. Mehler's supervisor, Ms. Mehraben, and told her that I would give APS access to my apartment but wanted a doctor who had not threatened me to do the evaluation. She told me that APS had started the paperwork to gain access to by a court order, because I had purportedly refused to be evaluated. I told her that I had not refused to be evaluated and in fact was calling to reschedule the evaluation. She told me that she would discontinue the court proceeding.

37. During that call, Ms. Mehraben also told me that Mr. Mehler had taken a different position within JASA and was no longer my case worker. She said that she would assign me a temporary caseworker and that I would have to wait for APS to hire someone new to have a permanent caseworker. In the interim, a temporary caseworker would be visiting my home and covering my case.

38. Sometime thereafter, another worker from APS, Fiona Birmingham, came to look at my apartment, but she would not discuss my APS case with me because a car was waiting for her outside. I tried to ask her for help with the Access-A-Ride appeal, with my SSI and SSD problems and with getting help slowly cleaning my apartment, increasing my Food Stamps, and home care, but she would not discuss any of these issues. However, she gave me her card, and said that she would be available to help me.

39. Following Ms. Birmingham's visit, I left her several messages, and she never returned any calls. I also called Ms. Mehraben several times and asked her why no one was helping me. I told her that I was barely surviving and sometimes could not afford to buy food. I said that I needed help applying for SSI and SSD and Section 8, that I needed help with financial management and getting home care, that I needed help appealing my Access-A-Ride grant, and that I needed help gradually cleaning my apartment, finding an SSD attorney and finding a neurologist with expertise in myasthenia graves. Every time I called her, Ms. Mehraben told me that APS could not help me until I have been assigned a caseworker.

40. On February 6, 2007, I received a notice that I had to recertify my Public Assistance benefits in person two days later, on February 8, 2007. It appeared that I had been unofficially dropped from the homebound disabled unit, as I was now being asked to recertify my benefits in person. I was too ill to go to this appointment. I called Ms. Mehraben and informed her that I desperately needed help with this situation because no HRA supervisor or caseworker returned my calls. She told me that I had no case manager and would not have one until a new person was hired, therefore no one could help me. Within a week I received a notice that my Public Assistance benefits had been discontinued.

41 After many phone calls, made both before and after my receipt of the notice of discontinuance, I was finally able to reschedule an appointment to recertify my benefits at my home, and was put back into the homebound disabled unit. This was very difficult for me and left me without energy to pursue my necessary medical treatment.

42. The psychiatric evaluation was not rescheduled until March of 2007. Two days before the evaluation, Ms. Birmingham finally called me solely to schedule the evaluation. At that time, she told me that she could not help me with anything I needed because she was not my caseworker.

43. On the day of the evaluation, Ms. Birmingham came with the psychiatrist told the psychiatrist that APS had provided me with no services to help me, and Ms. Birmingham said that that was because my home was too messy to provide home care. reiterated that no services of any kind had been provided to me and that Ms. Birmingham had refused to return my phone calls.

44. The psychiatrist then told Ms. Birmingham to arrange for a volunteer to come in on Saturdays to help me cook, go shopping and do some light cleaning. She also told Ms. Birmingham to help me with my Access-A-Ride appeal. I then told the psychiatrist that Ms. Birmingham had already said that she would not help me because she was not my caseworker. The psychiatrist said that that will change now, because she (the psychiatrist) was making the recommendation.

45. I did not hear from APS from that day until March 29, 2007. In the interim, no volunteer came to help me with light cleaning or shopping.

46. have recently been undergoing chelation treatment for metal poisoning and have become a little bit stronger. During March of 2007, I was able to reopen my application for SSI and submit my application for SSD, and submit an application for the Section 8 Rental Voucher Program. However, I do not have the strength to contact all of my doctors and gather the medical documentation I will need to substantiate my SSD and SSI claims, or look for alternative housing.

47. On March 29, 2007, two APS workers, Georgeianna Anderson and Ms. Cumina, made a surprise visit to my home. They had not been briefed on my case and were unaware of my limitations. Ms. Anderson told me that she was going to be my new case worker, and said that they were there ONLY to check if I was OK

48. told them that I was not OK and that there were things I needed help with, including getting more food, preventing my impending eviction, finding alternative housing, speaking with my doctors so I could get the documentation to support my SSD and SSI claim, with my Access-A-Ride appeal and finding an SSD attorney. First, Ms. Cumina said that APS' policy was not to speak to doctors, under any circumstances. She then told me that APS could not help me with my arrears until I received a notice of eviction.

49. I told her my landlord feels that I am taking advantage of the situation, as he had been lenient with me because I told him, as per Mr. Mehler, that APS would be helping me apply for a Public Assistance one shot deal for arrears. He specifically asked me to apply for a Public Assistance one shot deal so he would not have to go to court to evict me. I also told them that the pattern in my building is that once the landlord has to hire an attorney, he is relentless in eviction proceedings.

50. Ms. Anderson then asked me how much I owed in back rent- I said over \$4,000. She then asked why I had not applied for a Public Assistance one shot deal to pay the arrears, and I told her that I did not have the strength, and had asked APS to do so, and Mr. Mehler had initially agreed to do so.

51 Ms. Anderson and Ms. Cumina said that they didn't know that I needed help with getting more food and paying for my utilities. They also said that someone was supposed to have been covering my case and helping me.

52. On March 30, 2007, I was informed that my Access-A-Ride services were going to be discontinued because Access-A-Ride had come to pick me up on a few occasions and, due to a communication error, I had not been waiting outside. On those occasions, I did not know that the Access-A-Ride was ever here. I need help appealing this discontinuance and with my original appeal of my limited Access-A-Ride services grant so that my services may be extended to the borough of Queens during the spring and fall

53. I need help gradually cleaning my apartment so that I may get a roommate to help pay the rent

54. My primary care physician has told me that I need to see a toxicologist but I have not been able to find a toxicologist or a neurologist who has expertise in myasthenia graves that accepts Medicaid. I do not have the strength to find a toxicologist and a neurologist and I need APS to help me do so.

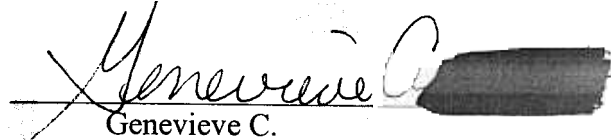
55 I owe over \$4,000 to my landlord and I fear that I will soon be evicted I need help to find alternate housing or help to apply for a Public Assistance one shot payment. If I had help cleaning the apartment gradually, I would be able to get a roommate and could easily afford my half of the rent.

56. If I am forced to leave my apartment, I do not need to be committed to PSCH housing as I do not suffer from a psychiatric disorder. However, Mr. Mehler told me that PSCH housing was his recommendation, and I was never given any other

options. Because of my illness, I would not be able to function in a homeless shelter. I desperately need help finding alternative housing and/or rent arrears. My primary focus in calling APS was to get help with eviction prevention and it appears that APS will not give me that help.

WHEREFORE, I respectfully request that this Court grant my motion for a Preliminary Injunction directing the defendants to promptly provide or ensure the provision adequate protective services to me.

Dated: April 2, 2007  
New York, New York

  
Genevieve C.